

ZONING CONFIRMATION REQUEST FORM

This form will assist the Zoning Division in providing confirmation of the applicable Zoning regulations for property within the City of Savannah's jurisdiction. Please provide the following information and submit this form to the 5515 Abercorn Street Savannah, GA 31405 or by emailing the form to bbarnes@savannahga.gov or by faxing the form to 912.651.6543.

A \$50 processing fee is required. Please submit a check or money order to 5515 Abercorn Street Savannah, GA 31405 payable to the City of Savannah.

PROJECT ADDRESS:	PIN:
CONTACT INFORMATION: NAME:	PHONE:
Address:	CITY/STATE/ZIP:
EMAIL ADDRESS:	FAX:
Additional Information	
Please describe in detail any addit Confirmation.	tional information required to complete the Zoning
	FOR OFFICE USE ONLY
Reviewed By/Date: Response Provided By: Email Letter	
Revision Date: August 29, 2013	